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ABSTRACT

This booklet along with six others comprises a curriculum guide developed for adult education supervisors and teachers of undereducated workers or job seekers whose inability to develop the skills and obtain the knowledge necessary to meet the requirements of the working world are primarily due to a lack of competence in reading and math skills. This seventh booklet outlines a prescriptive career-oriented adult instructional program (an individualized program of study prescribed according to each worker's specific job requirements and proficiency level in math and reading skills) for undereducated municipal government employees. (Booklets 4-6 are the other instructional packets developed in each of the following areas: Manufacturing, construction, and health services.) This booklet contains 24 one- to three-page lesson plans in which reading or math are taught in conjunction with specific job-related tasks to help workers increase their job performance as they become more proficient in reading and math. Each lesson plan in outline format includes the following: Title; identification as a reading or mathematics instructional plan for a specific skill level; related career knowledge area; the specific skill being taught; behavioral objectives; lists of instructional activities, procedures, and teacher materials (a chart and several forms are attached); and suggested type of evaluation. (EM)

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ED141628

AN ADULT PRESCRIPTIVE PROGRAM FOR LEVELS OF EMPLOYMENT— CAREER ORIENTED EDUCATION (APPLE CORE)

An Adult Education Curriculum Guide
based on
Instructional Materials Related to the
Occupational Needs of Employees
(Developed and Prepared by Project Apple Core Staff)

Bulletin #1258

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BOOKLET 7
Instructional Packet
Municipal Government Employees

Adult Education Act of 1966, as amended,
through the Division of Adult Education,
United States Office of Education
Department of Health, Education, and Welfare

Grant Number OEG-0-74-1811
Project Number V0016VA

OE 011 961

INSTRUCTIONAL PACKET

MUNICIPAL GOVERNMENT EMPLOYEES

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 1

EDUCATIONAL SKILL: Readiness

I. INSTRUCTIONAL OBJECTIVES

A. Given pairs of words, the student will designate if the two words begin with the same letter.

B. Given sets of three words, the student will determine which word begins with the letter "d".

C. Given groups of four words, the student will name which word begins with a different sound from the other words.

II. INSTRUCTIONAL ACTIVITIES

Auditory discrimination.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Introduce the sound of "d". Using the pairs of words below, the teacher will pronounce each pair. The student is to say if the two words begin with the same sound.

yes door / desk	no music / dust	no dirt / kiss
yes door / dog	no damaging / code	yes dig / disconnect

B. Using the word sets listed below, the teacher will pronounce the three words. Then the student will be asked the accompanying question. Repeat the words if necessary.

dust / plane / sky

Which word sounds like dog at the beginning?

coat / dirt / needle

Which word sounds like dog at the beginning?

dig / pencil / milk

Which word sounds like dog at the beginning?

C. The following groups of words are to be read orally to the student. The student is to name the word in the group which begins with a different sound. (All words are on form)

1. when	2. test	3. level
week	dirt	less
will	tank	disconnect
dust	tube	lift
4. hinge	5. packer	6. door
dip	plate	below
hose	pump	be
have	damaging	balance

IV. TEACHER MATERIALS

Teacher made activities.

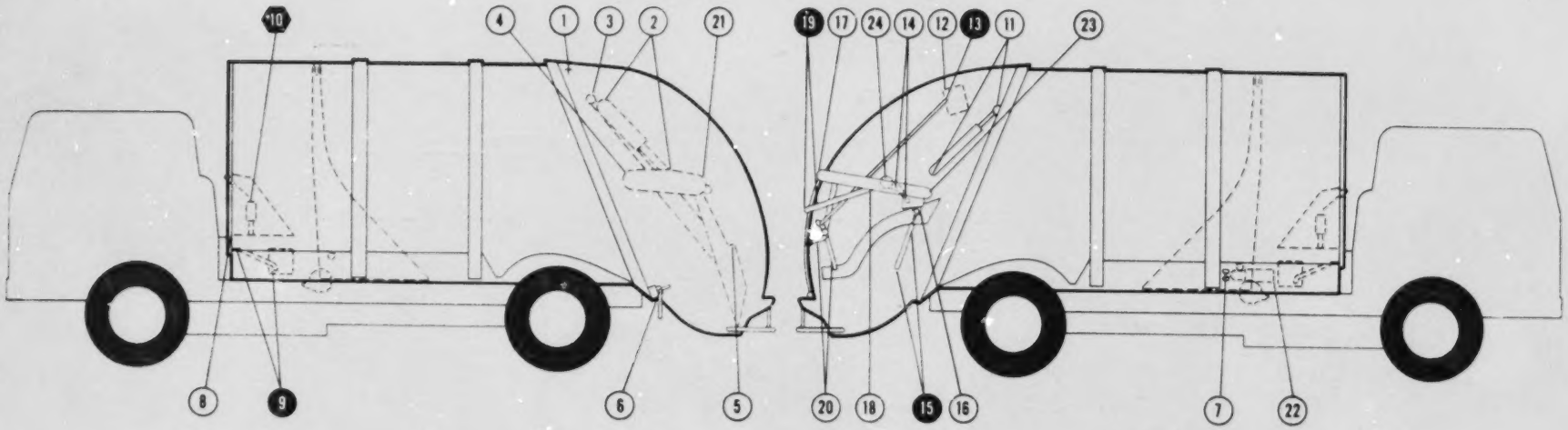
V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Leach lubrication chart.

LEACH LUBRICATION CHART for T3 SaniCruiser



NOTE:

In below freezing climates all grease and oils should have a cold test flow rating of –20°F or less.

Packer Plate should be in position shown when lubricating.

● Oil once a week – (40 hrs) with SAE =10 oil or equal.

○ Grease once a week – (40 hrs) with MOBILUX EPI MULTI-SERVICE grease or equal.

⬢ Oil should be to LEVEL on dip stick. To check level of oil the PACKER PLATE should be in a forward position.

In removing the oil filter disconnect oil hose at pump end, drain and flush tank. This will prevent dust and dirt from damaging pump.

LUBRICATION POINTS

NO.	LOCATION	RIGHT SIDE	LEFT SIDE	INSIDE OR OUTSIDE
1	Hinge	1	1	Out
2	Holding cylinder	–	2	In
3	Operating cylinder	1	1	In
4	Equalizing arm	1	1	In
5	Rollers	1	1	In
6	Tailgate clamp	1	1	Out
7	Clamp assembly	2	0	In
8	Pushout controls	2	2	Out
9	Control linkage	–	4	In
10	Oil filter	1	–	In
11	Tailgate lift cylinder	2	2	Out
12	Main operating valve	–	3	In

NO.	LOCATION	RIGHT SIDE	LEFT SIDE	INSIDE OR OUTSIDE
13	Control linkage	–	3	Out
14	Folding assembly	3	3	Out
15	Charging door balance spring	2	2	Out
16	Charging door balance spring	1	1	Out
17	Charging door	1	1	Out
18	Charging door spring tube	1	1	Out
19	Charging door spring tube	2	2	Out
20	Control levers	2	–	Out
21	Packer plate	1	1	In
22	Clamp cylinder	1	–	In
23	Charging door arm	1	1	Out
24	Cam	1	1	Out

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 1

EDUCATIONAL SKILL: Phonics

I. INSTRUCTIONAL OBJECTIVES

A. The instructor will pronounce a group of words containing or, ar and er, and the student will underline each word containing these "r" controlled vowels from a prepared list of words.

B. Using the word endings ar, er, and or, the student will make several words by adding one or more letters to the beginning of each word ending.

C. Given a paragraph having several words which contain "r" controlled vowels, the student will underline each word containing ar, er and or.

II. INSTRUCTIONAL ACTIVITIES

"r" controlled vowels.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Listen to each group of words and underline the words in which you hear the sound of:

or as in tractor
Dorset, truck, inspector, date, forest, permit

ar as in part
address, date, department, garbage, raise, license

er as in perch
trash, permit, axle, corner, packer, works

B. Make as many words as you can by adding one or more letters to the beginning of the following word endings: ar, er, or

Example: c ar

C. In the following paragraph underline the words which contain "r" controlled vowels:

James drives his car to work each morning. He is a collector at the Department of Public Works. His job is picking up garbage and trash. The inspector of his department is Mr. Dorset. Mr. Dorset says James is one of his best employees.

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Public Works Division Form 120177.

PERMIT NO.: _____

DEPARTMENT OF PUBLIC SAFETY
PUBLIC WORKS DIVISION
400 DORSET AVENUE
LAFAYETTE, LOUISIANA 70501

NAME: _____ DATE: _____

ADDRESS: _____

TRUCK LICENSE: _____ OCCUPATIONAL LICENSE: _____

TYPE OF TRUCK:

_____ 2 Axle _____ 3 Axle _____ Packer Type

_____ Part Time _____ Garbage

_____ Full Time _____ Trash

INSPECTOR _____

GF FORM 120177

PROJECT APPLE CORE

INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 1

EDUCATIONAL SKILL: Readiness

I. INSTRUCTIONAL OBJECTIVES

A. After being introduced to four letters of the alphabet, (A, C, D, S) the student will circle each capital and lower case of these letters on the Personal Car Allowance Report Form.

B. After identifying A, C, D and S, the student will practice writing these letters in both the upper and lower case.

C. Given a list of words with the beginning letters A, C, D and S underlined, the student will respond with the letter name of the underlined letter.

II. INSTRUCTIONAL ACTIVITIES

Letter recognition.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Introduce letters A, C, D, and S printed on cards in both upper and lower case.

B. Have student circle each capital A, C, D, and S letter on chart. Have student circle each lower case a, c, d, and s on chart. Work with only one letter at a time.

C. Have student practice writing letters A, C, D, and S in both upper and lower case.

D. Flash words from form beginning with the letters A, C, D, and S. Have the beginning letter underlined. Student responds with each individual letter name of the underlined letter.

Use the following words for this exercise:

A	C	D	S
am	car	due	section
an	city	date	speedometer
above	copy	director	signature
accurate	certify	division	
account		department	
allowance			
activities			
approved			
accounting			

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Personal Car Allowance Report Form.

CITY OF LAFAYETTE, LOUISIANA

Personal Car Allowance Report

FROM: Department of _____

Division _____

Section _____

Individual _____

Date	Beginning Speedometer Mileage	Ending Speedometer Mileage	Less Personal & Non-City Mileage	Total City Business Mileage

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 1

EDUCATIONAL SKILL: Readiness
Word Recognition

I. INSTRUCTIONAL OBJECTIVES

A. Given a set of cards printed in the upper and lower case, the student will recognize the letters c, p, and t.

B. Given a copy of the Leach SaniCruiser Lubrication Chart, the student will locate the letters c, p, t on the chart.

C. After receiving assistance with writing letters, student will write and identify letters c, p, t.

D. After selecting a key word beginning with the letters c, p, and t, the student will pronounce the words found on the chart beginning with these consonants.

II. INSTRUCTIONAL ACTIVITIES

A. Visual discrimination.

B. Phonics.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Instructor will introduce letters c, p, t upper and lower case printed on cards. Student will locate these letters on lubrication chart.

B. Student will identify the letters c, p, t found on the chart. (The letters may appear at the beginning, within or end of a word).

C. Instructor will assist student in writing (either manuscript or cursive) letters c, p, t. Student will write the three letters until he can do so with some degree of confidence.

D. Instructor will discuss key word concept for sound discrimination. After selecting a key word beginning with letters c, p, t, the student will pronounce the words found on the chart beginning with the consonants c, p, t.

IV. TEACHER MATERIALS

Lubrication chart

Flash cards

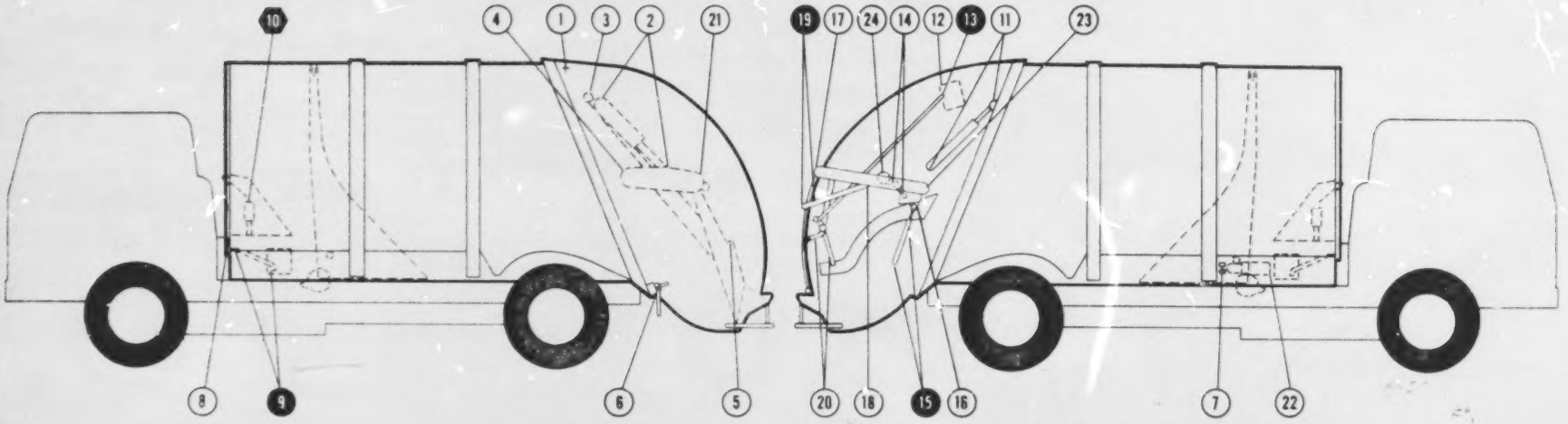
V. EVALUATION

Teacher Evaluation

VI. BIBLIOGRAPHY

Leach Lubrication Chart

LEACH LUBRICATION CHART for T3 SaniCruiser



NOTE:

In below freezing climates all grease and oils should have a cold test flow rating of -20 F or less.

Packer Plate should be in position shown when lubricating.

● Oil once a week – (40 hrs) with SAE 10 oil or equal.

○ Grease once a week – (40 hrs) with MOBILUX EPI MULTI-SERVICE grease or equal.

⬢ Oil should be to LEVEL on dip stick. To check level of oil the PACKER PLATE should be in a forward position.

In removing the oil filter disconnect oil hose at pump end, drain and flush tank. This will prevent dust and dirt from damaging pump.

LUBRICATION POINTS

NO.	LOCATION	RIGHT SIDE	LEFT SIDE	INSIDE OR OUTSIDE
1	Hinge	1	1	Out
2	Holding cylinder	–	2	In
3	Operating cylinder	1	1	In
4	Equalizing arm	1	1	In
5	Rollers	1	1	In
6	Tailgate clamp	1	1	Out
7	Clamp assembly	2	0	In
8	Pushout controls	2	2	Out
● 5	Control linkage	–	4	In
● 10	Oil filter	1	–	In
11	Tailgate lift cylinder	2	2	Out
12	Main operating valve	–	3	In

NO.	LOCATION	RIGHT SIDE	LEFT SIDE	INSIDE OR OUTSIDE
● 17	Control linkage	–	3	Out
14	Folding assembly	3	3	Out
● 15	Charging door balance spring	2	2	Out
16	Charging door balance spring	1	1	Out
17	Charging door	1	1	Out
18	Charging door spring tube	1	1	Out
● 19	Charging door spring tube	2	2	Out
20	Control levers	2	–	Out
21	Packer plate	1	1	In
22	Clamp cylinder	1	–	In
23	Charging door arm	1	1	Out
24	Cam	1	1	Out

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 2

EDUCATIONAL SKILL: Word Recognition

I. INSTRUCTIONAL OBJECTIVES

A. Given a group of four words, the student will circle the words which contain the sound of oi.

B. Given a root word, the student will make new words by adding a consonant or a consonant blend at the beginning of the word.

C. Given a group of sentences, the student will underline each word which contains the sound of the key word oil.

II. INSTRUCTIONAL ACTIVITIES

Phonics.

A. Dipthong.

B. Consonant substitution to identify new words.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Have groups of words printed on cards. Teacher will pronounce each group of words. Student will listen to each group of words and circle the words in which the sound of oi as in key words oil or noisy is heard.

1. hoses other radio spoil

2. cool soil knocks voice

3. repair join toil bolts

4. coil check boil horn

B. Write the word "oil" on a sheet of paper. The student will make new words by adding a consonant or a consonant blend at the beginning of the word.

Example - soil, boil, foil, toil, coil, spoil, broil

C. Draw a line under each word in which you hear the sound of your key word "oil".

1. A worker's clothing is soiled at the end of a busy day at the department of public works.

2. The electrical ccil was broken.

3. The vehicle maintenance shop was very noisy.

4. The flat tire on the truck spoiled the driver's job plans.

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Driver's Vehicle Condition Report.

DRIVER: CHECK (✓) LIST
DEPARTMENT OF PUBLIC WORKS
SANITATION DIVISION
DRIVER'S VEHICLE CONDITION REPORT

TRUCK NO. OR TRACTOR NO: _____ DATE: _____ TIME OUT: _____

TRAILER NO: _____ TIME IN: _____ MILEAGE OUT/HRS: _____

DRIVER: _____ MILEAGE IN / HRS: _____

☐☐ PREVENTIVE MAINTENANCE INSPECTION

MECHANIC'S DRIVER'S

ENGINE
- ☐☐ CHECK FOR OIL, WATER AND FUEL LEAKS
- ☐☐ KNOCKS
- ☐☐ MISSES
- ☐☐ HARD STARTING
- ☐☐ OVERHEATING
- ☐☐ OTHER _____

CLUTCH
- ☐☐ CHECK FOR SLIPPING OR GRABBING
- ☐☐ OTHER _____

TRANSMISSION
- ☐☐ NOISY
- ☐☐ HARD SHIFTING
- ☐☐ LEAKS
- ☐☐ OTHER _____

HYDRAULIC SYSTEM
- ☐☐ HOSES
- ☐☐ LINES
- ☐☐ OTHER _____
- ☐☐ PUMP
- ☐☐ LIFTER

REAR AXLE
- ☐☐ NOISY
- ☐☐ GREASE LEAKS
- ☐☐ OTHER _____

MECHANIC'S DRIVER'S

MISCELLANEOUS
- ☐☐ DRIVE LINE
- ☐☐ 5TH WHEEL, SAFETY CHAINS AND PINTLE HOOK
- ☐☐ DOOR GLASS, WINDSHIELDS AND MIRRORS
- ☐☐ OTHER _____

REFRIGERATION/HEAT
- ☐☐ WILL NOT COOL/HEAT
- ☐☐ OTHER _____

RADIO
- ☐☐ WILL NOT TRANSMIT
- ☐☐ OTHER _____

STEERING
- ☐☐ LOOSENESS
- ☐☐ SHIMMY
- ☐☐ STEERS HARD
- ☐☐ OTHER _____

TIRES
- ☐☐ REPAIR TIRE
- ☐☐ CHECK SPARE
- ☐☐ CHECK WHEELS AND LUG BOLTS
- ☐☐ OTHER _____

MECHANIC'S DRIVER'S

SPRINGS
- ☐☐ BROKEN
- ☐☐ OTHER _____

BRAKES
- ☐☐ CHECK TRL. CONNECTIONS
- ☐☐ PARKING BRAKES
- ☐☐ SERVICE BRAKES
- ☐☐ CHECK FOR AIR OR HYDRAULIC LEAKS
- ☐☐ OTHER _____

INSTRUMENT PANEL
- ☐☐ OIL PRESSURE GAUGE
- ☐☐ AMMETER
- ☐☐ HORN
- ☐☐ WINDSHIELD WIPERS
- ☐☐ SPEEDOMETER
- ☐☐ OTHER _____

ELECTRICAL
- ☐☐ CHECK TRAILER LIGHT CORD
- ☐☐ LIGHTS: HEAD, TAIL STOP, TURN, CLEARANCE
- ☐☐ REFLECTORS
- ☐☐ OTHER _____

APPROVED FOREMAN _____

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 1 - L 2

EDUCATIONAL SKILL: Study Skills

I. INSTRUCTIONAL OBJECTIVES

A. Given a copy of a Lubrication Chart for a Leach T3 Sanicruiser the student will arrange the lubrication points in alphabetical order.

B. Identify the lubrication points on a garbage truck.

II. INSTRUCTIONAL ACTIVITIES

A. Alphabetical order.

B. Locating information.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Instructor will introduce concept of how words are listed alphabetically in the dictionary and other reference materials. Student will arrange 24 items listed as lubrication points on chart in alphabetical order.

B. Instructor will explain the various parts of the lubrication chart according to the number, locating name, left or right of the truck and whether the point is located inside or outside of the vehicle. Student will locate each (24) lubrication points on the chart and state the point number, location name, left or right side of the truck and exact location on inside or outside of vehicle. Student will be able to adequately identify each lubrication point on the garbage truck in order to enable him to grease the truck properly.

IV. TEACHER MATERIALS

Lubrication chart

V. EVALUATION

Teacher evaluation

VI. BIBLIOGRAPHY

Leach lubrication chart

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Forms LEVEL: L 2

EDUCATIONAL SKILL: Word Recognition

I. INSTRUCTIONAL OBJECTIVES

A. Given a list of words, the student will add "s" to the words, will write the new words and will pronounce both words.

B. Given a list of words, the student will add "d" or "ed" to each word, will write the new words and will pronounce the words.

C. Given a group of sentences, the student will underline the word which will best completes the sentence from a choice of two words.

D. Given several phrases, the student will fill in the correct ending of the last word.

II. INSTRUCTIONAL ACTIVITIES

A. Structural analysis.

B. Context clues.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Add "s" to each word. Write the words on the blank. Pronounce the words.

division _____

date _____

employee _____

hour _____

leave _____

other _____

reason _____

signature _____

work _____

B. Add "d" or "ed" to each word. Write the words on the blank. Pronounce the words.

approve _____

date _____

disapprove _____

direct _____

request _____

employ _____

time _____

validate _____

work _____

C. Underline the correct word in the parenthesis to complete the sentence.

1. The director must (approve, approved) all leave requests.
2. A reason must be given if the leave request is (disapproved, disapproves).
3. All leave request forms are (valid, validated) by the office clerk.
4. Leave request forms must be (submits, submitted) in duplicate.

5. Each employee receives 10 days of (annual, annuals) leave per year.

6. The actual number of (day, days) and (hours, hour) must be filled in on the form.

D. In each phrase below fill in the correct ending of the last word with "s", "d" or "ed."

1. Give several reason _____(s)

2. Frank has work _____(ed)

3. Requires two signature _____(s)

4. Ned will be employ _____(ed)

5. The form is date _____(ed)

6. Jerry works for eight hour _____(s)

7. Your leave request is approve_____(d)

8. There are 400 employee_____(s)

9. Public Works consists of five division_____(s)

10. Be sure the request is date _____(d)

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Leave Request Form.

COL FORM 23 – 4'73

CITY OF LAFAYETTE

PUBLIC WORKS DIVISION
400 DORSET AVE.
LAFAYETTE, LA.

LEAVE REQUEST

ANNUAL LEAVE ☐ DATE _____

COMP TIME ☐ TIME SUBMITTED _____

I hereby request my leave from _____ to _____ for _____ days.

_____ _____
SIGNATURE OF EMPLOYEE SUPERINTENDENT

Permanent Status ☐ Yes ☐ No	Days	Hours
Leave to date	_____	_____
Less this leave and others	_____	_____

Validated by _____

Approved ☐ Disapproved ☐

_____
PUBLIC WORKS DIRECTOR

Reason for disapproval _____

_____

_____

PWD FORM #17 (JUNE 22, 1971)
1201719

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Forms LEVEL: L 2

EDUCATIONAL SKILL: Word Recognition

I. INSTRUCTIONAL OBJECTIVES

A. Given a prepared list of suffixes and root words, the student will combine the suffixes with the correct root form.

B. The student will identify words containing suffixes in a group of sentences.

C. Given a list of root words, the student will add the proper suffix.

II. INSTRUCTIONAL ACTIVITIES

Structural Analysis.

Suffixes.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

Below is a list of suffixes and root words. Combine each suffix with the correct root form. Each suffix will be used more than once.

Suffix	Root Form
ment	depart
tions	manage
	regulate
	situate

Suffix	Root Form
ing	lodge
	exist
ed	request
	incurr
er	office
or	originate
	direct

B. Student will identify the words which contain a suffix in the following sentences; some sentences contain more than one correct response:

1. Show the estimated mileage for the trip.
2. Always conform with the existing travel regulations.
3. The Director of your department must approve the travel request.
4. Some unexpected situations may develop during the trip.
5. List all expenses incurred during the trip.

C. The student will add the proper suffix to each word below.

ment tions ing ed er or

develop_____

copy _____

travel_____

except_____

work_____

confirm_____

advance_____

attach_____

IV. TEACHER MATERIALS

Teacher made exercises.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Request for Official Travel and Advance Monies Form.

CITY OF LAFAYETTE

COL. FORM # 610 – 11/79

REQUEST FOR OFFICIAL TRAVEL AND ADVANCE MONIES

(Prepare in triplicate)

REQUEST SHOULD BE SUBMITTED TWO (2) WEEKS PRIOR TO DATE OF DEPARTURE. EXCEPTIONS WILL BE MADE FOR UNANTICIPATED SITUATIONS.

Destination _____

Leave _____
DATE HOUR

Return _____
DATE HOUR

Method of travel used: (Circle one) Plane bus train City car Personal car

If personal care used, state reason: _____

_____

Purpose of Travel: _____

_____

_____
(attach available literature)

If City car requested, show estimated mileage _____

Estimated maximum expense to be incurred _____

Lodging preference Yes _____ No _____ If yes, where: _____

Why: _____

I certify that the above travel will be on official business of the City of Lafayette, Louisiana, and will conform with existing travel regulations.

NAME _____

TITLE _____

APPROVED:

Division Head _____
DATE

Director of Department _____
DATE

Mayor _____
DATE

Budget Management Officer _____
DATE

COPY FOR: ACCOUNTING

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Forms LEVEL: L 2 - L 3

EDUCATIONAL SKILLS: Word Recognition

I. INSTRUCTIONAL OBJECTIVES

Given a copy of an Application for Employment, the student will:

A. Underline the root word contained in a list of words.

B. Select the correct prefix or suffix for a group of words.

C. Underline each word in the Personal Data section containing a prefix or suffix.

II. INSTRUCTIONAL ACTIVITIES

Structural Analysis

A. Root word.

B. Prefixes.

C. Suffixes.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Below is a list of words found on the Application for Employment form. Underline the root word of each word listed.

1. employment
2. applied
3. certification
4. professional
5. defects
6. disabilities
7. occupational
8. responsibilities
9. subdivision
10. specialty

B. Add the proper prefix or suffix to the words listed below:

1. __ploy	6. profession__
2. division__	7. certify___
3. occupy___	8. defect___
4. employ___	9. responsible___
5. ability___	10. apply___

C. Underline each word on page 1 - Personal Data Section which has a prefix or suffix. Some prefixes are un and dis. Examples of suffixes are ing, s, ed, er, ly, tions, ment and al.

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Application for Employment Form.

CITY OF LAFAYETTE

MUNICIPAL GOVERNMENT EMPLOYEES CIVIL SERVICE
704 LEE AVENUE
LAFAYETTE, LOUISIANA 70501
(318) 233-6611 EXT. 300

APPLICATION FOR EMPLOYMENT

Fill out this application on typewriter or print in ink. To avoid delay in processing please give complete and accurate information.

IDENTIFICATION

1. **Position applied for:** _____

2. **Name:** _____
LAST FIRST MIDDLE

3. **Address:** _____
NUMBER STREET APARTMENT NO.

_____
CITY STATE ZIP CODE

4. **Phone:** _____ _____
RESIDENCE BUSINESS

5. **Height** _____ **Weight** _____

6. **Social Security Number:** _____

DO NOT WRITE IN THIS SPACE							
WC		SSAN					
SEP		RES					
RV		RI					

PERSONAL DATA

ANSWER THE FOLLOWING QUESTIONS BY PLACING AN "X" UNDER "YES" OR "NO".	YES	NO
7. Are you a citizen of the United States?		
8. Are you a registered voter of the city or parish of Lafayette?		
9. Are you a registered voter of the state of Louisiana?		
10. Within the past 10 years, have you been discharged from a position because your work or conduct was unsatisfactory?		
11. Have you previously worked for the City of Lafayette?		
12. May inquiry be made of your present employer concerning your character, qualifications, etc.?		
13. Have you ever been convicted of an offense other than minor traffic violations? (convictions are not necessarily a bar to employment)		
14. Have you any physical or mental defects, disabilities, or chronic diseases? If "yes" explain in item # 21. (remarks).		

SPECIAL QUALIFICATIONS

15. List any licenses, certifications or other professional registrations.

_____
_____
_____
_____
_____

16. If you are applying for office work answer the following:
Typing _____ wpm
Shorthand _____ wpm
List any office machines you are skilled in operating:

_____
_____
_____

THE CITY OF LAFAYETTE IS AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

17. Circle the last grade of school you completed:
Grade School 1 2 3 4 5 6 7 8 High School 9 10 11 12 GED

List your education since high school including colleges, business, trade, correspondence, and military service schools.

Colleges, Universities and Junior Colleges Attended

NAME AND LOCATION	Date Attended From	Date Attended To	Credit Hours	Major	Degree and Year

Business or Trade Schools Attended

NAME AND LOCATION	Date Attended From	Date Attended To	Courses Completed	Date of Diploma or Certificate

Correspondence or Military Courses Completed

NAME AND LOCATION	Length of Course	Courses Completed	Date Completed

MILITARY SERVICE

18. Branch of Service (Army, Navy, etc.)	Rank at Time of Separation	Type of Discharge (Honorable, General, Dishonorable)
Date Entered Active Duty	Date Separated From Active Duty RETIRED YES ☐ NO ☐	Military Occupational Specialty

Was Service Performed on Active Full Time Basis With Full Time Pay and Allowance YES ☐ NO ☐

19. EXPERIENCE: Begin with your present or latest position and work backwards. Account for all periods of employment or unemployment. Give your duties and responsibilities in such detail as to make your qualifications clear.

STUDY THE FOLLOWING EXAMPLE:

Place: Frankfort, KY.

From: Oct. (Month), 19 64 (Yr.), to July (Month), 19 69 (Yr.)

Commonwealth of Kentucky
Name of Employer

Finance Bldg., Auditor's Office
Address

Public Service
Kind of Business or Organization

Yes
Was This a Supervisory Position?

A. C. Cole Asst. State Auditor
Name and Title of Your Immediate Supervisor

To Enter Army
Reason for Leaving

Exact Title of Your Position: Senior Auditor

Salary: Starting, $ 910.00 per month Final, $ 1099.00

Duties and Responsibilities: Made field audits of accounts of state departments or political subdivisions or of persons and business firms subject to taxation or regulation by the State. Made assignments and reviewed the work of assistants; prepared reports in connection with audits made; gave instructions and direction to public officials in connection with approved methods of accounting for public funds. Occasionally testified in courts on matters involving audits completed.

EMPLOYMENT HISTORY

1) PRESENT OR LAST POSITION

Place _____

From _____ (Month), 19____ (Yr.), to _____ (Month), 19____ (Yr.)

Name of Employer _____

Address _____

Kind of Business or Organization _____

Was this a Supervisory Position? _____

Name and Title of your Immediate Supervisor _____

Reason for Leaving _____

Exact Title of Your Position: _____

Salary: Starting, $ _____ per _____ Final, $ _____

Duties and Responsibilities: _____

2) NEXT PREVIOUS POSITION

Place _____

From _____ (Month), 19____ (Yr.), to _____ (Month), 19____ (Yr.)

Name of Employer _____

Address _____

Kind of Business or Organization _____

Was this a Supervisory Position? _____

Name and Title of Your Immediate Supervisor _____

Reason for Leaving _____

Exact Title of Your Position: _____

Salary: Starting, $ _____ per _____ Final, $ _____

Duties and Responsibilities: _____

3) NEXT PREVIOUS POSITION

Place _____

From _____ (Month), 19____ (Yr.), to _____ (Month), 19____ (Yr.)

Name of Employer _____

Address _____

Kind of Business or Organization _____

Was this a Supervisory Position? _____

Name and Title of Your Immediate Supervisor _____

Reason for Leaving _____

Exact Title of Your Position: _____

Salary: Starting, $ _____ per _____ Final, $ _____

Duties and Responsibilities: _____

4) NEXT PREVIOUS POSITION

Place _____

From _____ Month 19 ____ Yr. to _____ Month 19 ____ Yr.

_____
Name of Employer

_____
Address

_____
Kind of Business or Organization

_____
Was this a Supervisory Position?

_____
Name and Title of Your Immediate Supervisor

_____
Reason for Leaving

_____

Exact Title of Your Position: _____

Salary: Starting, $ _____ per _____ Final, $ _____

Duties and Responsibilities: _____

_____

_____

_____

_____

_____

_____

_____

_____

REFERENCES

20. List three persons (not relatives or past employers) who have definite knowledge of your qualifications and fitness to the position for which you are applying.

FULL NAME	ADDRESS (complete)	BUSINESS OR OCCUPATION

REMARKS

21.

I certify that all statements made in this application are true, complete and correct to the best of my knowledge. I realize that any misrepresentation herein may cause my application to be rejected, my name removed from the eligible list, or I may be subject to dismissal from the employ of the City of Lafayette.

22. Signature	Date

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Safety LEVEL: L 1 - L 2

EDUCATIONAL SKILL: Study Skill

I. INSTRUCTIONAL OBJECTIVES

A. Given a list of words, the student will arrange the words in alphabetical order.

B. Given groups of words beginning with the same letter, the student will arrange the groups of words in alphabetical order.

C. Given groups of words, the student will place each word in the group in alphabetical order.

II. INSTRUCTIONAL ACTIVITIES

Alphabetical order.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Write these words found on the First Report of Injury Form in the correct alphabetical order.

began	department	accident
form	claim	gross
employee	injury	hour
payments	location	name
signature	machine	report
use	tool	work

B. Number the following words to show their alphabetical order.

1.	2.	3.
___ lost	___ name	___ form
___ location	___ notified	___ first
___ length	___ nature	___ foot
___ leave	___ no	___ for
___ less	___ net	___ from

4.

___ title
___ time
___ thing
___ tool
___ thru

5.

___ work
___ week
___ witness
___ was
___ where

C. Place each group of words in alphatetical order. Notice one word has been placed in its proper position.

1. absent, address, accident, and

_____
_____
_____
and

2. class, claim, cost, causing
causing

_____
_____
_____

3. days, date, day, data
data

_____
_____
_____

4. home, hour, how, hospital

_____
hospital.
_____
_____

5. prepared, probable, physician, personnel
personnel

_____
_____
_____
_____

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

First Report of Injury Form.

Form PER-15 (Aug 64)

FIRST REPORT OF INJURY

Date Prepared: _____

1. Name of Injured: _____ 2. Dept.: _____

3. Home Address: _____ 4. Class Title: _____

5. Date of Injury: _____ 19__ Day of Week: _____ Hour: _____ am pm

6. If lost time, date and time disability began: _____ 19__ Hour: _____ am pm

7. (a) Name and title of Supervisor: _____

   (b) When was supervisor notified of injury: _____

8. Location where accident occurred: _____

9. Describe fully how accident occurred and state what employee was doing when injured:

_____

_____

_____

_____

_____

10. (a) Machine, tool or thing causing injury: _____

    (b) Kind of power (hand, foot, electricity, etc.): _____

11. Names of Witnesses: _____

12. Nature and location of injury: _____

13. Has injured returned to work: ( )Yes ( ) No

    (a) If yes, give date and hour returned: _____ 19__ Hour: _____ am pm

    (b) If no, give probable length of disability: _____

14. Name and address of physician: _____

15. Name and address of hospital: _____

16. Remarks: _____

_____ _____

(Signature - Person Preparing Report) (Signature - Injured Employee)

_____ _____

(Signature - Supervisor of Injured) (Signature - Head of Department)

CLAIM NO. _____

WORKSHEET (FOR PERSONNEL DEPT USE)

PAY RATE	ABSENT FROM	ABSENT THRU	DAYS LOST	W. DAYS LOST	SICK LEAVE COST GROSS	SICK LEAVE COST LESS	SICK LEAVE COST NET	MISCELLANEOUS COSTS
HR:								
DA:								
MO:								

COMPENSATION PAID FROM	COMPENSATION PAID TO	COMPENSATION PAID AMT	COMPENSATION PAID (Cont'd) FROM	COMPENSATION PAID (Cont'd) TO	COMPENSATION PAID (Cont'd) AMT	COMPENSATION PAID (Cont'd) DISP	OTHER PAYMENTS PAID TO	OTHER PAYMENTS AMT

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Reading

CAREER KNOWLEDGE AREA: Safety LEVEL: L 2

EDUCATIONAL SKILL: Word Recognition

I. INSTRUCTIONAL OBJECTIVES

A. Given a pair of words containing the same double consonants the student will divide the words into syllables.

B. Given a list of words containing double consonants, the student will divide each word into syllables.

C. Given several sentences with one word omitted, the student will select the correct word from a group of words provided which will best complete each sentence.

II. INSTRUCTIONAL ACTIVITIES

Phonics

A. Double consonants.

B. Vowel-consonant-consonant-vowel.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. When the first vowel in a word is followed by double consonants, the syllables are usually divided between the double consonants. Draw a line between the syllables in each word.

1. carry	2. slippery	3. according
arrow	happen	accident
4. middle	5. dotted	6. following
muddy	attached	yellow
7. passengers		
witnesses		

B. Read each word. Write the number of syllables each word has:

1. issued _____ 7. penny _____
2. called _____ 8. slippery _____
3. foggy _____ 9. follow _____
4. coffee _____ 10. office _____
5. comment _____ 11. accident _____
6. muddy _____ 12. supper _____

C. Choose the word which contains a double consonant to complete each sentence. Write the word you choose in the blank.

1. coffee tea milk

   Joe and Irving stopped for _____ at the Diners' Inn.

2. clean muddy shiny

   The truck was very _____ and needed to be washed.

3. paved bumpy slippery

   A _____ road surface is dangerous to drive on.

4. foggy snowy rainy

   Perhaps the accident was caused by the _____ weather.

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Vehicle Accident Report Form.

Case No. _____

FORM PER-17 (APR 69)

VEHICLE ACCIDENT REPORT – CITY OF LAFAYETTE

CITY OPERATOR

1. NAME OF CITY OPERATOR | 2. DIVISION (SECTION) | 3. EMP. DATE
4. CLASS TITLE | 5. HOME ADDRESS | 6. PHONE

TIME & PLACE

7. DATE OF ACCIDENT
8. TIME OF ACCIDENT: (AM) (PM)
9. LOCATION:

TYPE ACCIDENT

10. ☐ HEAD-ON ☐ SIDESWIPE ☐ ANGLE ☐ REAR-END ☐ OTHER

ACCIDENT INVOLVED

11. ☐ ANOTHER VEHICLE ☐ BUILDING OR FIXTURE ☐ PEDESTRIAN ☐ OTHER

WEATHER CONDITIONS

12. ☐ CLEAR ☐ RAINING ☐ SLEETING ☐ FOGGY ☐ OTHER

ROAD CONDITIONS

13. ☐ GOOD ☐ UNDER REPAIR ☐ SLIPPERY ☐ MUDDY ☐ ICY OR SNOWY

CITY VEHICLE (NO. 1)

14. YEAR | 15. MAKE | 16. MODEL | 17. UNIT NO. | 18. LICENSE NO.
19. VEHICLE BEING USED TO:
20. NAMES OF PASSENGERS:
21. LIST DAMAGE TO CITY VEHICLE:

OTHER VEHICLE (NO. 2)

22. NAME OF OWNER | 23. ADDRESS | 24. PHONE
25. NAME OF DRIVER | 26. ADDRESS | 27. PHONE
28. MAKE OF VEHICLE | 29. MODEL OF VEHICLE | 30. LICENSE NO. & STATE
31. LIST DAMAGE TO OTHER VEHICLE:

DAMAGE TO PROPERTY

32. LIST DAMAGE TO PROPERTY (OTHER THAN VEHICLES):

PERSONS INJURED

33. NAME AND ADDRESS	AGE	SEX	TYPE INJURIES

WITNESSES

34. NAME AND ADDRESS	REMARKS

NOTIFICATION AND INVESTIGATION

35. POLICE NOTIFIED? ( ) YES ( ) NO. 36. POLICE INVESTIGATED? ( ) YES ( ) NO.
37. SUPERVISOR NOTIFIED ( ) YES ( ) NO: 15 IF YES, WHEN: _____
38. NAME OF SUPERVISOR: _____

TURN PAGE AND COMPLETE OTHER SIDE

U FORM 020061

39. COMPLETE THE FOLLOWING DIAGRAM SHOWING DIRECTION & POSITIONS OF AUTOMOBILES INVOLVED DESIGNATING CLEARLY POINT OF CONTACT

Indicate by arrow direction of north N

Instructions:

(1) Use solid line to show path of vehicle before accident ——— · [1]

[2] dotted line after accident

(2) Number each vehicle & show direction of travel ——— · [2]

(3) Show motorcycle by ——— · O—O

(4) Show pedestrian by ——— · O

(5) Show railroad by ⊣+⊣+⊣+⊣+⊣+⊣

40. OPERATOR'S DESCRIPTION OF ACCIDENT (REFER TO VEHICLES BY NUMBER WITH CITY VEHICLE AS NO. 1)

SIGNATURE OF OPERATOR | TITLE OF OPERATOR | DATE SIGNED

41. COMMENT OF FOREMAN/SUPERVISOR AS TO HOW CITY OPERATOR COULD HAVE PREVENTED THIS ACCIDENT:

SIGNATURE OF SUPERVISOR | TITLE | DATE SIGNED

42. COMMENTS OF HEAD OF DEPARTMENT:

A. NAME OF SUPERVISOR DETAILED TO INVESTIGATE: _____

B. SUPERVISOR'S INVESTIGATION REPORT: ( ) IS ATTACHED ( ) WILL BE FORWARDED

C. WAS CITY OPERATOR ISSUED CITATION BY POLICE? ( ) YES ( ) NO; IF YES, WHAT WAS HE CHARGED WITH? _____

D. WHAT ACTION HAVE YOU TAKEN OR WILL YOU TAKE REGARDING THIS ACCIDENT? _____

SIGNATURE | TITLE | DATE SIGNED

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 1

EDUCATIONAL SKILL: Whole Numbers

I. INSTRUCTIONAL OBJECTIVES

A. Given a list of numbers from a single digit to six digits, the student will read each number aloud.

B. Given a list of numbers from a single digit to six digits, the student will write each number in words.

II. INSTRUCTIONAL ACTIVITIES

A. Recognizing whole numbers.

B. Writing whole numbers in words.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

Some of the numbers below appear on the enclosed form. Read each number aloud to your instructor and then write each number in words. (Recognizing and writing whole numbers.)

A. 2_____

13_____

20_____

B. 152_____

400_____

3,039_____

C. 7,555_____

70,501_____

120,177_____

IV. TEACHER MATERIALS

Teacher made practical problems.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Public Works Division Form 120177.

PERMIT NO.: _____

DEPARTMENT OF PUBLIC SAFETY
PUBLIC WORKS DIVISION
400 DORSET AVENUE
LAFAYETTE, LOUISIANA 70501

NAME: _____ DATE: _____

ADDRESS: _____

TRUCK LICENSE: _____ OCCUPATIONAL LICENSE: _____

TYPE OF TRUCK:

_____ 2 Axle _____ 3 Axle _____ Packer Type

_____ Part Time _____ Garbage

_____ Full Time _____ Trash

INSPECTOR _____

GF FORM 120177

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 2

EDUCATIONAL SKILL: Whole Numbers
General Knowledge Skill

I. INSTRUCTIONAL OBJECTIVES

A. Given pertinent information, the student will complete the upper portion of the Driver's Vehicle Condition Report.

B. Given a filled in COLFORM #375, the student will determine the total time a truck was driven and the total accumulated mileage of the truck.

II. INSTRUCTIONAL ACTIVITIES

A. Whole Numbers.

1. Writing numbers.

2. Subtraction.

B. Telling Time.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. On June 15, 1975, Sidney Stiner, equipment operator for the Public Works Sanitation Division, drove truck #041 to and from several job locations described as follows:

At 8:30 a.m. the beginning mileage speedometer reading was 37,570. Sidney drove a four-hour route which covered 137 miles.

Using the above information, complete as much of the top part "A" of COLFORM #375 as you can.

B. Wilson Hopkins filled in COLFORM #375 for a job as follows:

Driver: Wilson Hopkins
Truck No. 034 — Date: December 13, 1975
Time In: 1:45 p.m. — Mileage In: 9,890
Time Out: 4:30 p.m. — Mileage Out: 10,073

1. The total time truck #034 was driven for this job was (2) hours and (45) minutes.

2. The total mileage on truck #034 for this job was 183 miles.

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Driver's Vehicle Condition Report.

DRIVER: CHECK (✓) LIST
DEPARTMENT OF PUBLIC WORKS
SANITATION DIVISION
DRIVER'S VEHICLE CONDITION REPORT

Part A

TRUCK NO. OR TRACTOR NO: _____ DATE: _____ TIME OUT: _____

TRAILER NO: _____ TIME IN: _____ MILEAGE OUT/HRS: _____

DRIVER: _____ MILEAGE IN / HRS: _____

☐☐ PREVENTIVE MAINTENANCE INSPECTION

MECHANIC'S DRIVER'S

ENGINE
- ☐☐ CHECK FOR OIL, WATER AND FUEL LEAKS
- ☐☐ KNOCKS
- ☐☐ MISSES
- ☐☐ HARD STARTING
- ☐☐ OVERHEATING
- ☐☐ OTHER _____

CLUTCH
- ☐☐ CHECK FOR SLIPPING OR GRABBING
- ☐☐ OTHER _____

TRANSMISSION
- ☐☐ NOISY
- ☐☐ HARD SHIFTING
- ☐☐ LEAKS
- ☐☐ OTHER _____

HYDRAULIC SYSTEM
- ☐☐ HOSES ☐☐ PUMP
- ☐☐ LINES ☐☐ LIFTER
- ☐☐ OTHER _____

REAR AXLE
- ☐☐ NOISY
- ☐☐ GREASE LEAKS
- ☐☐ OTHER _____

MECHANIC'S DRIVER'S

MISCELLANEOUS
- ☐☐ DRIVE LINE
- ☐☐ 5TH WHEEL, SAFETY CHAINS AND PINTLE HOOK
- ☐☐ DOOR GLASS, WINDSHIELDS AND MIRRORS
- ☐☐ OTHER _____

REFRIGERATION/HEAT
- ☐☐ WILL NOT COOL/HEAT
- ☐☐ OTHER _____

RADIO
- ☐☐ WILL NOT TRANSMIT
- ☐☐ OTHER _____

STEERING
- ☐☐ LOOSENESS
- ☐☐ SHIMMY
- ☐☐ STEERS HARD
- ☐☐ OTHER _____

TIRES
- ☐☐ REPAIR TIRE
- ☐☐ CHECK SPARE
- ☐☐ CHECK WHEELS AND LUG BOLTS
- ☐☐ OTHER _____

MECHANIC'S DRIVER'S

SPRINGS
- ☐☐ BROKEN
- ☐☐ OTHER _____

BRAKES
- ☐☐ CHECK TRL. CONNECTIONS
- ☐☐ PARKING BRAKES
- ☐☐ SERVICE BRAKES
- ☐☐ CHECK FOR AIR OR HYDRAULIC LEAKS
- ☐☐ OTHER _____

INSTRUMENT PANEL
- ☐☐ OIL PRESSURE GAUGE
- ☐☐ AMMETER
- ☐☐ HORN
- ☐☐ WINDSHIELD WIPERS
- ☐☐ SPEEDOMETER
- ☐☐ OTHER _____

ELECTRICAL
- ☐☐ CHECK TRAILER LIGHT CORD
- ☐☐ LIGHTS: HEAD, TAIL STOP, TURN, CLEARANCE
- ☐☐ REFLECTORS
- ☐☐ OTHER _____

APPROVED FOREMAN _____

NEGLECTING A SMALL DEFECT TODAY, MAY MEAN A MAJOR REPAIR JOB TOMORROW.

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 1

EDUCATIONAL SKILL: Whole Numbers

I. INSTRUCTIONAL OBJECTIVES

Given a printed copy of a Leach Lubrication Chart, the student will determine:

A. The cold-test flow rating of grease and oil in below freezing climates.

B. How often the vehicle should be oiled and greased.

C. The total number of lubrication points on the left and right sides.

II. INSTRUCTIONAL ACTIVITIES

A. Recognizing symbols.

B. Reading numbers.

C. Counting.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Read carefully, the Leach Lubrication Chart for T 3 SaniCruiser and answer the following questions:

1. What is the cold test flow rating of all grease and oils in below freezing climates? _____

2. How often should the vehicle be oiled? _____

Greased? _____

3. What is the total number of lubrication points on the left side? _____ Right side? _____

IV. TEACHER MATERIALS

Teacher made activities.

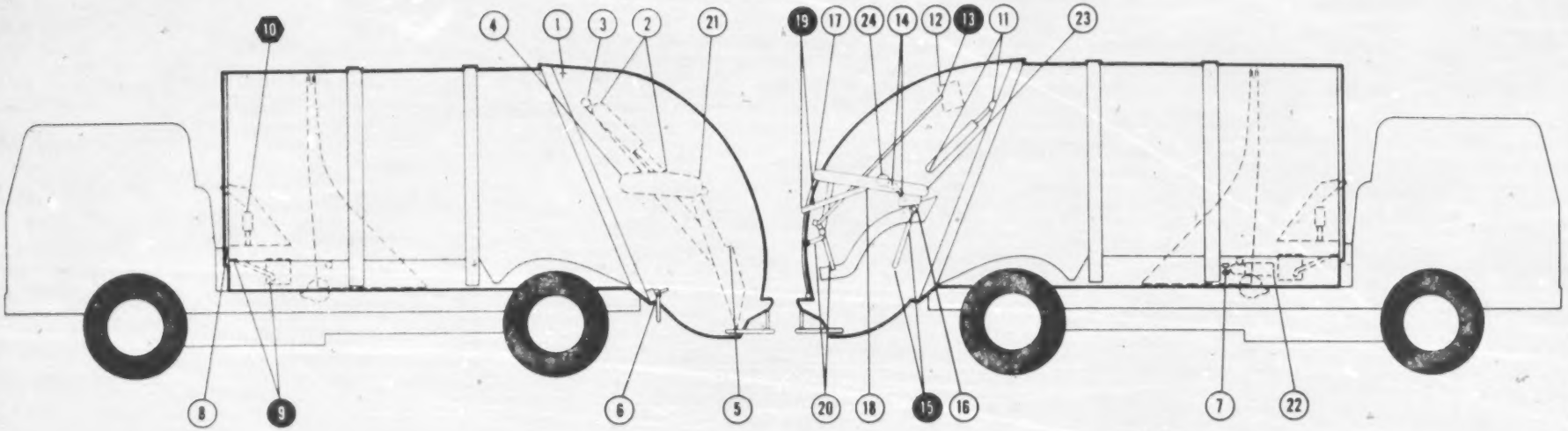
V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Leach Lubrication Chart.

LEACH LUBRICATION CHART for T3 SaniCruiser



NOTE:

In below freezing climates all grease and oils should have a cold test flow rating of -20°F or less.

Packer Plate should be in position shown when lubricating.

● **Oil once a week – (40 hrs) with SAE #10 oil or equal.**

○ **Grease once a week – (40 hrs) with MOBILUX EPI MULTI-SERVICE grease or equal.**

⬢ **Oil should be to LEVEL on dip stick. To check level of oil the PACKER PLATE should be in a forward position.**

In removing the oil filter disconnect oil hose at pump end, drain and flush tank. This will prevent dust and dirt from damaging pump.

LUBRICATION POINTS

NO.	LOCATION	RIGHT SIDE	LEFT SIDE	INSIDE OR OUTSIDE
1	Hinge	1	1	Out
2	Holding cylinder	–	2	In
3	Operating cylinder	1	1	In
4	Equalizing arm	1	1	In
5	Rollers	1	1	In
6	Tailgate clamp	1	1	Out
7	Clamp assembly	2	0	In
8	Pushout controls	2	2	Out
9	Control linkage	–	4	In
10	Oil filter	1	–	In
11	Tailgate lift cylinder	2	2	Out
12	Main operating valve	–	3	In

NO.	LOCATION	RIGHT SIDE	LEFT SIDE	INSIDE OR OUTSIDE
●	Control linkage	–	3	Out
14	Folding assembly	3	3	Out
●	Charging door balance spring	2	2	Out
16	Charging door balance spring	1	1	Out
17	Charging door	1	1	Out
18	Charging door spring tube	1	1	Out
19	Charging door spring tube	2	2	Out
20	Control levers	2	–	Out
21	Packer plate	1	1	In
22	Clamp cylinder	1	–	In
23	Charging door arm	1	1	Out
24	Cam	1	1	Out

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Equipment LEVEL: L 2 - L 3

EDUCATIONAL SKILL: Whole Numbers

I. INSTRUCTIONAL OBJECTIVES

Given a copy of the Personal Car Allowance Report, the student will fill in five portions of the form concerning beginning and ending speedometer mileage, personal and non-city mileage and total city business mileage.

II. INSTRUCTIONAL ACTIVITIES

A. Subtraction.

B. Addition.

C. Multiplication.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

During January, Joseph Benoit, City of Lafayette employee, uses his personal automobile five times for city business.

A. Compute the missing portions A, B, C, D, and E in each column.

B. Compute the total miles for the month of January.

C. If the mileage allowance is 12¢ per mile, compute the total allowance due to Joseph.

IV. TEACHER MATERIALS

Teacher made math practical problems.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Personal Car Allowance Report Form.

CITY OF LAFAYETTE, LOUISIANA

Personal Car Allowance Report

FROM: Department of: Public Works

Division: Streets and Drainage

Section: Traffic Control

Individual: Joseph Benoit

Date	Beginning Speedometer Mileage	Ending Speedometer Mileage	Less Personal & Non City Mileage	Total City Business Mileage
1/7	13,421	13,468	5	E.
1/15	13,533	13,590	C.	52
1/17	13,620	B.	0	75
1/22	13,974	14,101	D.	113
1/30	A.	14,337	8	87

Total Miles

Rate per Mile $ ¢

Total Allowance Due $

I hereby certify that the above represents an accurate account of personal car mileage incurred in the performance of City of Lafayette activities for which I am responsible.

Employee's Signature Date

Division Head

CERTIFY: Accounting Division

Approved by:

Department Director Date

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Forms LEVEL: L 1 - L 2

EDUCATIONAL SKILL: Whole Numbers

I. INSTRUCTIONAL OBJECTIVES

Given details of a proposed itinerary for a business trip, the student will determine:

A. Total mileage for a 3-day trip.

B. Estimated expense for lodging and meals.

C. Estimated total maximum expense to be incurred.

II. INSTRUCTIONAL ACTIVITIES

A. Addition.

B. Multiplication.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

Al Boudreaux is planning a 3-day business trip. His daily travel schedule is as follows:

first day - Lafayette to Alexandria (72 miles)
second day - Alexandria to Baton Rouge (107 miles)
third day - Baton Rouge to Lafayette (66 miles)

A. What is the total mileage for the 3-day trip?

B. If the estimated cost for lodging is $15.00 per day, and for meals is $8.00 per day, what is the estimated expense to be incurred (assuming there would be two nights lodging)?

C. What is the estimated maximum expense to be incurred?

IV. TEACHER MATERIALS

Teacher made practical problems.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

Request for Offical Travel and Advance Monies Form.

CITY OF LAFAYETTE

REQUEST FOR OFFICIAL TRAVEL AND ADVANCE MONIES

(Prepare in triplicate)

REQUEST SHOULD BE SUBMITTED TWO (2) WEEKS PRIOR TO DATE OF DEPARTURE. EXCEPTIONS WILL BE MADE FOR UNANTICIPATED SITUATIONS.

Destination _____

Leave _____ DATE _____ HOUR

Return _____ DATE _____ HOUR

Method of travel used: (Circle one) Plane bus train City car Personal car

If personal care used, state reason: _____

_____

Purpose of Travel _____

_____

_____ (attach available literature)

If City car requested, show estimated mileage _____

Estimated maximum expense to be incurred _____

Lodging preference Yes _____ No _____ If yes, where: _____

Why _____

I certify that the above travel will be on official business of the City of Lafayette, Louisiana, and will conform with existing travel regulations.

NAME _____

TITLE _____

APPROVED

Division Head _____ DATE

Director of Department _____ DATE

Mayor _____ DATE

Budget Management Officer _____ DATE

COPY FOR: ACCOUNTING

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Forms LEVEL: L 1 - L 2

EDUCATIONAL SKILL: Whole Numbers
General Knowledge Skill

I. INSTRUCTIONAL OBJECTIVES

A. Given various annual leave requests for one year the student will determine the total cumulative days of annual leave.

B. Given a date on which a Leave Request form was submitted, and the number of days thereafter until approval, the student will determine the date of approval.

C. Given the date of the first day of annual leave, and the total number of consecutive days of the leave, the student will determine the date of the last day of the leave.

II. INSTRUCTIONAL ACTIVITIES

A. Addition.

B. "Greater than" concept between whole numbers.

C. Reading a calendar.

D. Counting.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. During the year of 1974, Leroy Lawrence took annual leave as follows:

February - 4 days
June - 1 day
July - 2 days
November - 3 days

1. What is the total number of days of annual leave Leroy Lawrence took in 1974? (10 days)

2. In which month did Lawrence take the most days of annual leave? (February)

B. Joseph LeBlanc submitted a Leave Request on Apri 12, and eight days later the request was approved. On what date was the request approved? (Circle the correct response.)

1. April 20 2. May 8 3. April 15

4. None of these

C. John Landry wants to submit a Leave Request for five days beginning Monday, July 7. What will be the last day and date of his annual leave? (Friday, July 11).

IV. TEACHER MATERIALS

Leave Request Form.

Calendar.

V. EVALUATION

Teacher Evaluation.

VI. BIBLIOGRAPHY

Leave Request Form.

FORM 25 - 4/73

CITY OF LAFAYETTE

PUBLIC WORKS DIVISION
400 DORSET AVE.
LAFAYETTE, LA.

LEAVE REQUEST

ANNUAL LEAVE ☐ DATE _____

COMP TIME ☐ TIME SUBMITTED _____

I hereby request my leave from _____ to _____ for _____ days.

_____ _____
SIGNATURE OF EMPLOYEE SUPERINTENDENT

		Days	Hours
Permanent Status	☐ Yes ☐ No		
Leave to date		_____	_____
Less this leave and others		_____	_____

Validated by _____

Approved ☐ Disapproved ☐

_____
PUBLIC WORKS DIRECTOR

Reason for disapproval _____

_____

_____

PWD FORM 417 JUNE 22, 1971
1201719

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Safety LEVEL: L 1 - L 2

EDUCATIONAL SKILL: Whole Numbers
General Knowledge Skill

I. INSTRUCTIONAL OBJECTIVES

Given a hypothetical situation the student will determine:

A. Lost time hours due to an accident.

B. Total number of hours missed per day.

C. Amount of compensation collected.

II. INSTRUCTIONAL ACTIVITIES

A. Whole Numbers.

1. Addition.

2. Subtraction.

3. Multiplication.

B. Telling Time.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

Read carefully the First Report of Injury Form, PER-15 (Aug. '64). Assume that the work hours for Narcisse Domingue are from 8:00 a.m. to 5:00 p.m. with one hour off for lunch. The date of the injury was February 3, 1974, at 9:00 a.m. He returned to work on February 6, 1974, at 8:00 a.m.

Answer the following questions:

A. How many hours of work time did Narcisse lose because of the accident?_____

B. How many hours of work were missed on Monday?_____

1. What is the total number of hours missed because of this injury? _____

C. If Narcisse makes $4.00 per hour, how much money will he collect to compensate for his loss in wages as a result of this injury?

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

VI. BIBLIOGRAPHY

First Report of Injury Form.

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Municipal Government

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Safety LEVEL: L 1 - L 3

EDUCATIONAL SKILL: Whole Numbers
General Knowledge Skill

I. INSTRUCTIONAL OBJECTIVES

Given a copy of the Vehicle Accident Report Form, the student will:

A. Associate a numbered response with a numbered item on the form.

B. Given the position of an accident, the student will circle its location on a map of the area.

C. Given the time of the accident and the time police officers arrived to investigate, the student will determine the elapsed time.

II. INSTRUCTIONAL ACTIVITIES

A. Word-number association.

B. Telling time.

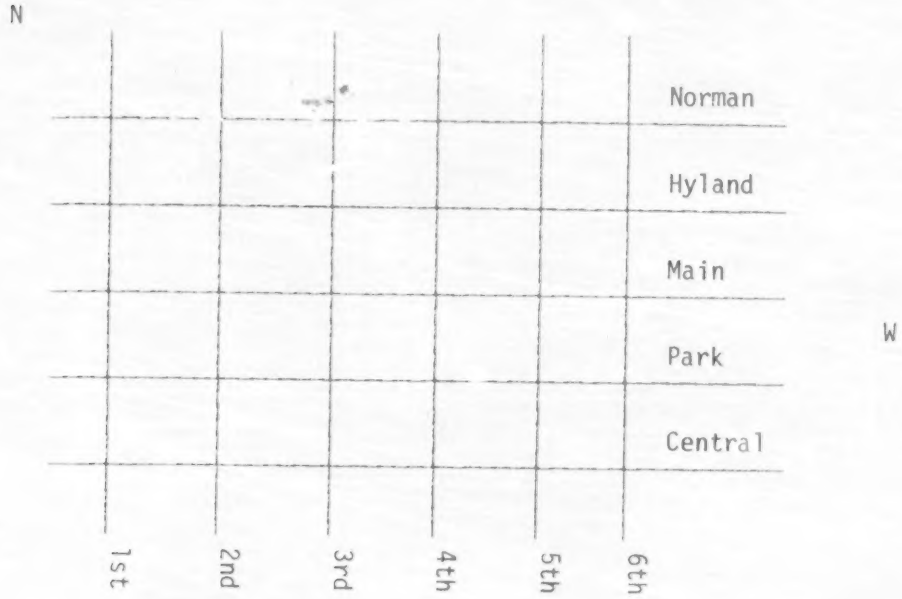
III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Read the following information concerning an accident involving a city vehicle. The paragraph contains information to fill in items numbered 3, 5, 6, 7, 8, 14, 17 and 18 on the Vehicle Accident Report form.

Ray Breaux was involved in an accident on August 30, 1975, at 2:07 p.m. Ray's home address is 206 Park Street, and his telephone number is 813-2041. He has been employed by the city since June 1, 1970.

At the time of the accident Ray was driving a 1973 Leach garbage truck, unit number 27, and license number 19009.

B. Below is a map of the area of the accident. Circle the location of the accident if it occurred at the corner of 5th Street and Main.



C. The accident occurred at 2:07 p.m. Police officers arrived to investigate the accident at 2:23 p.m. How long did it take for the police officers to arrive at the scene of the accident?

FORM PER-17 (APR 69)

Case No. _____

VEHICLE ACCIDENT REPORT – CITY OF LAFAYETTE

CITY OPERATOR

1. NAME OF CITY OPERATOR
2. DIVISION (SECTION)
3. EMP. DATE
4. CLASS TITLE
5. HOME ADDRESS
6. PHONE

TIME & PLACE

7. DATE OF ACCIDENT
8. TIME OF ACCIDENT: (AM) 2:07 (PM)
9. LOCATION:

TYPE ACCIDENT

10. ☐ HEAD-ON ☐ SIDESWIPE ☐ ANGLE ☐ REAR-END ☐ OTHER

ACCIDENT INVOLVED

11. ☐ ANOTHER VEHICLE ☐ BUILDING OR FIXTURE ☐ PEDESTRIAN ☐ OTHER

WEATHER CONDITIONS

12. ☐ CLEAR ☐ RAINING ☐ SLEETING ☐ FOGGY ☐ OTHER

ROAD CONDITIONS

13. ☐ GOOD ☐ UNDER REPAIR ☐ SLIPPERY ☐ MUDDY ☐ ICY OR SNOWY

CITY VEHICLE (NO. 1)

14. YEAR	15. MAKE	16. MODEL	17. UNIT NO.	18. LICENSE NO.
1973			# 27	19009

19. VEHICLE BEING USED TO:

20. NAMES OF PASSENGERS:

21. LIST DAMAGE TO CITY VEHICLE:

OTHER VEHICLE (NO. 2)

22. NAME OF OWNER	23. ADDRESS	24. PHONE
		234-6666
25. NAME OF DRIVER	26. ADDRESS	27. PHONE

28. MAKE OF VEHICLE	29. MODEL OF VEHICLE	30. LICENSE NO. & STATE

31. LIST DAMAGE TO OTHER VEHICLE:

DAMAGE TO PROPERTY

32. LIST DAMAGE TO PROPERTY (OTHER THAN VEHICLES):

PERSONS INJURED

33. NAME AND ADDRESS	AGE	SEX	TYPE INJURIES

WITNESSES

34. NAME AND ADDRESS	REMARKS

NOTIFICATION AND INVESTIGATION

35. POLICE NOTIFIED? ( ) YES ( ) NO. 36. POLICE INVESTIGATED? ( ) YES ( ) NO.

37. SUPERVISOR NOTIFIED ( ) YES ( ) NO: IF YES, WHEN: _____

38. NAME OF SUPERVISOR: _____

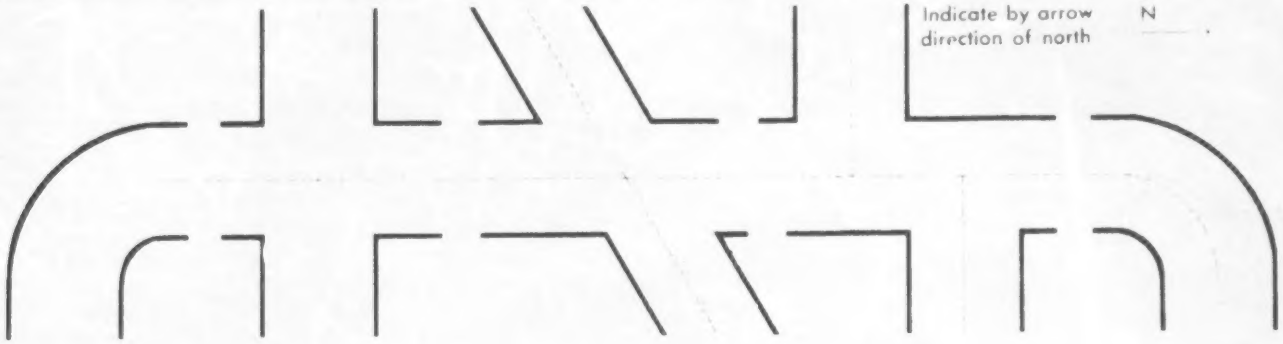
70 TURN PAGE AND COMPLETE OTHER SIDE

U FORM 020061

71

39. COMPLETE THE FOLLOWING DIAGRAM SHOWING DIRECTION & POSITIONS OF AUTOMOBILES INVOLVED DESIGNATING CLEARLY POINT OF CONTACT

Indicate by arrow direction of north N



Instructions:

(1) Use solid line to show path of vehicle before accident → [1]

[2] dotted line after accident

(2) Number each vehicle & show direction of travel → [2]

(3) Show motorcycle by —·— O—O

(4) Show pedestrian by —·— O

(5) Show railroad by +-+-+-+-+-+-+

40. OPERATOR'S DESCRIPTION OF ACCIDENT (REFER TO VEHICLES BY NUMBER WITH CITY VEHICLE AS NO. 1)

\

SIGNATURE OF OPERATOR | TITLE OF OPERATOR | DATE SIGNED

41. COMMENT OF FOREMAN/SUPERVISOR AS TO HOW CITY OPERATOR COULD HAVE PREVENTED THIS ACCIDENT:

SIGNATURE OF SUPERVISOR | TITLE | DATE SIGNED

42. COMMENTS OF HEAD OF DEPARTMENT:

A. NAME OF SUPERVISOR DETAILED TO INVESTIGATE: _____

B. SUPERVISOR'S INVESTIGATION REPORT: ( ) IS ATTACHED ( ) WILL BE FORWARDED

C. WAS CITY OPERATOR ISSUED CITATION BY POLICE? ( ) YES ( ) NO; IF YES, WHAT WAS HE CHARGED WITH? _____

D. WHAT ACTION HAVE YOU TAKEN OR WILL YOU TAKE REGARDING THIS ACCIDENT? _____

SIGNATURE | TITLE | DATE SIGNED

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Occupational Orientation

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Tax Deductions LEVEL: L 3

EDUCATIONAL SKILL: Whole Numbers

I. INSTRUCTIONAL OBJECTIVES

Given the net pay for a period of one week, the student will compute the additional amount of money he would receive if the percentage of federal withholding tax was decreased.

II. INSTRUCTIONAL ACTIVITIES

Percent

III. SUGGESTED INSTRUCTIONAL PROCEDURES

Fred read in the newspaper that federal tax withholdings would be decreased 2.5% of total net pay. Fred wants to determine the exact additional amount of money he will receive at the end of the week.

Fred's net pay is $150.00 a week.

What will his additional pay be for one week?

IV. MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Occupational Orientation

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Social Security Payments LEVEL: L 3

EDUCATIONAL SKILL: Whole Numbers
Decimals
Percentage

I. INSTRUCTIONAL OBJECTIVES

A. Given examples of nine (9) digit numbers, the student will read the numerals stated on a Social Security card.

B. Given a hypothetical situation, the student will determine the total amount of Social Security taxes an individual will pay.

II. INSTRUCTIONAL ACTIVITIES

A. Whole Numbers.

1. Reading numbers.

2. Multiplication.

B. Decimals.

C. Percentage.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Read the following numerals:

509-26-1375 608-67-1408 762-53-1362

Look at your Social Security card. Is your number similar to the examples above?

B. Harry's weekly salary is $96.00. The Social Security deduction is 4% of your gross pay ($96). What is his total Social Security payment?

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Occupational Orientation

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Payroll LEVEL: L 2 - L 3

EDUCATIONAL SKILL: Whole Numbers
Fractions
Decimals

I. INSTRUCTIONAL OBJECTIVES

A. Given an hourly rate, the student will calculate the gross pay for a regular 40-hour week.

B. Given a regular hourly rate, the student will calculate the amount of overtime pay received for two hours of overtime work.

C. Given the total gross pay and a list of deductions, the student will determine the total amount deducted per pay period.

D. Given the net pay for one week, the student will compute the monthly net income.

II. INSTRUCTIONAL ACTIVITIES

A. Whole Numbers.

1. Addition.

2. Subtraction.

3. Multiplication.

B. Fractions.

C. Decimals.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Irving works for the city in a Worker I position. He is paid $2.30 per hour. How much money will Irving receive for a 40-hour work week?

B. Some weeks Irving works overtime. He gets paid time and a half for this work. If he earns $2.30 per hour for regular time, how much money will he receive for two hours of overtime work?

C. Irving's gross pay is $92.00 per week. The following tax deductions are taken out of his check:

Social Security	$2.93
Federal Income Tax	7.42
State Income Tax	1.35

How much is deducted from his gross pay each week?

D. Based on the information given in section C above, what is the total amount of net pay Irving will receive per month?

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Occupational Orientation

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Insurance Deductions LEVEL: L 2

EDUCATIONAL SKILL: Whole Numbers

I. INSTRUCTIONAL OBJECTIVES

Given the gross pay and net pay along with other deductions, the student will determine how much he pays for insurance each pay period.

II. INSTRUCTIONAL ACTIVITIES

A. Addition.

B. Subtraction.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

Frank works for the city. His gross pay is $100.00 per week. He does not take all of this money home because of various deductions which are as follows:

Federal Income Tax	$15.20
Union Dues	2.00
Credit Union	1.50
Social Security	.75
Retirement	1.00

The only deduction not listed is for insurance. If Frank's net pay is $70.00, how much does he pay for insurance?

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.

PROJECT APPLE CORE
INSTRUCTIONAL PACKET

TITLE: Occupational Orientation

INSTRUCTIONAL PLAN: Mathematics

CAREER KNOWLEDGE AREA: Union Dues LEVEL: L 3

EDUCATIONAL SKILL: Whole Numbers
Decimals
Percent

I. INSTRUCTIONAL OBJECTIVES

A. Given the monthly gross pay and the percentage to be withheld for union dues, the student will compute the amount paid for union dues.

B. Given the total net pay and the amount of union dues withheld each month, the student will figure out the percentage withheld.

II. INSTRUCTIONAL ACTIVITIES

A. Whole Numbers.

1. Multiplication.

2. Division.

B. Decimals.

C. Percent.

III. SUGGESTED INSTRUCTIONAL PROCEDURES

A. Sam's gross pay per month is $535.00. He pays 2% of his salary to the union. How much are his monthly union dues?

B. Tom pays $20.96 per month for union dues. His gross pay is $525.00. What percentage of his gross pay is withheld each month for union dues?

IV. TEACHER MATERIALS

Teacher made activities.

V. EVALUATION

Teacher evaluation.